Using the "Rate Table - CLAB Data for CMS LTCH PPS" Output Option

The NHSN Analysis Output Option, "Rate Table – CLAB Data for CMS LTCH PPS" was created in order to allow long term care hospitals (known as long term acute hospitals, or LTACs, in NHSN) to review those data that would be submitted to CMS on their behalf. It's important to keep in mind the following as you begin to use this report:

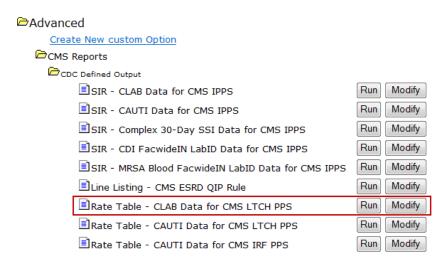
- a. These data will only be submitted for those facilities that are participating in the CMS Long Term Care Hospital Quality Reporting Program, as indicated by their CCN recorded in NHSN.
- b. This report will only include in-plan CLABSI data for each LTAC ICU and ward location beginning with October 2012 data. Earlier time periods for which you may have reported CLABSI data will not be included in this output.
- c. **IMPORTANT!** Facilities must appropriately **Report No Events** for those locations and months for which no CLABSI events were identified.
- d. This output option provides rates for each LTAC, <u>not</u> each CCN. If your LTAC shares a CCN, the rates will only represent the data that your LTAC has contributed to the overall rate for all LTACs that share the CCN. You may wish to use the Group function in NHSN to be able to view the rates for all LTACs that share a CCN. More information about the Group function can be found here: http://www.cdc.gov/nhsn/group-users/index.html.
- e. The rates that will be shared with CMS and presented in this output option are calculated at the location type level. Separate rates will be calculated for LTAC ICU, LTAC ward, LTAC pediatric ICU, and LTAC pediatric ward locations. A single overall CLABSI rate for the entire LTAC facility will not be calculated.
- f. The data in this report will represent data current as of the last time you generated datasets. Data changes made in NHSN will be reflected in the next monthly submission to CMS. **EXCEPTION:** Quarterly data are frozen as of the final submission date for that quarter (e.g., Q4 data will be frozen as of 1am ET on May 16th); any changes made to these data in NHSN after the final submission deadline will not be reflected in data shared with CMS.
- g. The information in this document should be used in conjunction with the document, ""Helpful Tips for CLABSI Reporting for the Centers for Medicare and Medicaid Services' Long Term Care Hospital Quality Reporting Program", available at http://www.cdc.gov/nhsn/cms/index.html.



Example of the "Rate Table – CLAB Data for CMS LTCH PPS" Output Option:

Before running this output option, remember to generate your datasets for the most up-to-date data reported to NHSN by your facility! To generate datasets, go to Analysis > Generate Data Sets, then click "Generate New".

After selecting Analysis > Output Options, navigate through the following folders: Advanced >
CMS Reports > CDC-Defined Output. Click "Run" next to "Rate Table – CLAB Data for CMS LTCH
PPS", as shown below:



- 2. By default, the results will appear in an HTML window. If a second window does not pop-up, please be sure to check your pop-up blocker and allow pop-ups from *.cdc.gov.
- 3. A single table titled "Rate Table for CLABSI Data for CMS Long Term Care Hospital PPS" will be presented in the pop-up HTML window. The table presents rates for each calendar quarter, stratified by the eligible location types. This is the information that will be submitted to CMS for your facility.

The rates in the table are stratified by a variable called "loccdc," which corresponds with a CDC-defined location description. Each value of loccdc is displayed as a code. The codes align with the CDC-defined location descriptions as shown in the table below:

| "loccdc" code | CDC location description | | |
|------------------------|--------------------------|--|--|
| IN:ACUTE:CC:LTAC | LTAC ICU | | |
| IN:ACUTE:WARD:LTAC | LTAC Ward | | |
| IN:ACUTE:CC:LTAC_PED | Pediatric LTAC ICU | | |
| IN:ACUTE:WARD:LTAC_PED | Pediatric LTAC Ward | | |



Sample output for the "Rate Table – CLAB Data for CMS LTCH PPS" output option is displayed below:

National Healthcare Safety Network

Rate Table for Central Line-Associated BSI Data for CMS Long Term Care Hospital PPS

As of: April 19, 2013 at 10:43 AM Date Range: All CLAB_RATESLTAC

orgID=17776

| loccdc | summaryYQ | months | clabcount | numcldays | CLABRate | rate95ci |
|------------------------|-----------|--------|-----------|-----------|----------|---------------|
| IN:ACUTE:CC:LTAC | 2012Q4 | 3 | 1 | 485 | 2.062 | 0.103, 10.169 |
| IN:ACUTE:WARD:LTAC | 2012Q4 | 3 | 1 | 340 | 2.941 | 0.147, 14.506 |
| IN:ACUTE:WARD:LTAC_PED | 2012Q4 | 2 | 1 | 450 | 2.222 | 0.111, 10.960 |

Source of aggregate data: Not available

Data contained in this report were last generated on April 19, 2013 at 10:40 AM.

From this output, we can conclude the following:

- For the fourth quarter of 2012, this LTAC reported CLABSI data from three location types (*loccdc*)
- For the LTAC ICU location, the facility reported all three months of data in that quarter (months)
- In those three months, the facility reported 1 CLABSI from the LTAC ICU location (clabcount) and 485 central line days (numcldays), which results in a rate of 2.062 CLABSIs per 1,000 central line days (CLABRate)
- The 95% confidence interval around the CLABSI rate for the LTAC ICU location is (0.103, 10.169) (rate95ci)
- The facility reported three months of data for the quarter from the LTAC ward location
- The facility only reported two months of data for the quarter from the pediatric LTAC ward location
- 4. What can be done if data are incomplete, as in the pediatric LTAC ward example above, or if the number of infections or central line days is incorrect?
 - i. Check that the summary data for this location have been entered for each month in the quarter. This includes central line days and patient days.
 - ii. If summary data have been entered, double-check your monthly reporting plan for each month in the quarter. Check to make sure that each location is included in your monthly reporting plan, with the CLABSI box checked.



Updated April 2013

- iii. If summary data have been entered and no CLABSIs have been identified, be sure to check the 'Report No Events' box on the summary record, next to the Central Line days count.
- iv. If the number of infections is less than you reported *and* you've confirmed that the summary data have been entered in-plan, double check the BSI events in NHSN: if central line is entered as "No", the event is *not* considered a CLABSI and will not appear in this report. Note that you can edit the event with the correct information.

REMEMBER: If you have made any changes to your data, regenerate your datasets in order to review your output options with the most up-to-date data in NHSN.

